

Residential Student Assistance Program

The Residential Student Assistance Program (RSAP) is a substance abuse prevention program developed for high-risk adolescents, 14 to 17 years old, living in residential facilities. The program is based on the Westchester Student Assistance Model and works by placing highly trained professionals in residential facilities to provide residents with a full range of substance abuse prevention and early intervention services. The program uses proven prevention strategies that include:

- Information dissemination
- Normative and preventive education
- Problem identification and referral
- Community-based interventions
- Environmental approaches

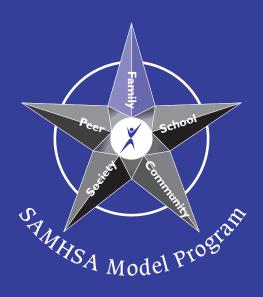
RSAP counselors work with adolescents individually and in small groups. Intervention services are fully integrated into the adolescent's overall experience at the residential facility and have an impact on both their school and residential environments.

TARGET POPULATION

RSAP was tested with 14- to 17-year-old adolescents, primarily African American and Hispanic/Latino, living in various residential facilities. Whether voluntarily or involuntarily placed in such facilities, these youth typically present with multiple risk factors and problems, including early substance use; parents who abuse substances; participation in violent or delinquent acts; histories of physical, sexual, or psychological abuse; chronic failure in school; and mental health problems, including attempted suicide.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov



Effective Substance Abuse and Mental Health Programs for Every Community

Proven Results*

- 68% decrease in overall substance use
- 72% reported ending alcohol use
- 59% reported ending marijuana use
- 27% reported ending tobacco use
- 82% of alcohol nonusers remained nonusers
- 83% of marijuana nonusers remained nonusers
- 79% of tobacco nonusers remained nonusers
- * Relative to adolescents in comparison groups who did not participate in the RSAP.

INTERVENTION

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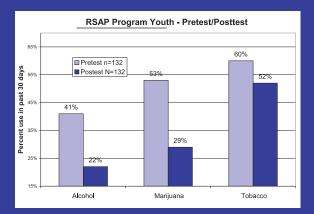
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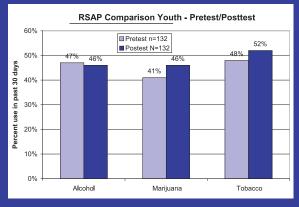
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OUTCOMES

Adolescents participating in RSAP showed dramatic reductions in their use of alcohol, marijuana, and tobacco from pretest to posttest measures. For youth not reporting use at pretest, data regarding 30-day use at posttest revealed that:

- 82% remained nonusers of alcohol
- 83% remained nonusers of marijuana
- 78% remained nonusers of tobacco





For youth who reported using substances at the pretest, their posttest reports of use in the past 30 days showed:

- 72% reported no longer using alcohol
- 59% reported no longer using marijuana
- 27% reported no longer using tobacco

BENEFITS

Teaches adolescents important resistance and social competency skills, including:

- Communication
- Decisionmaking
- Stress and anger management
- Problem solving
- Resisting peer pressure

HOW IT WORKS

A partnership is established between a prevention agency and residential facility. An individual with a master's degree in social work, counseling, or psychology, who is experienced in adolescent substance abuse prevention counseling, is recruited to work in the facility as a Student Assistance Counselor (SAC). The SAC provides the facility with a full range of substance abuse prevention and early intervention services that will help residents decrease their risk factors for substance abuse and increase their overall resiliency. Program components include:

- The Prevention Education Series—The SAC conducts this eightsession substance use prevention education program.
- Assessment—Following the Prevention Education Series, residents are seen individually by the SAC to determine their level of substance use, family substance abuse, and need for additional services.
- Individual and Group Counseling—After assessment, the SAC conducts a series of 8 to 12 group-counseling sessions. Residents are placed in one of five different groups based on their developmental differences, substance use patterns, and family history of substance abuse. Individual sessions are scheduled as needed.
- Referral & Consultation—The SAC refers residents who require
 assistance to treatment, more intensive counseling, or 12-step groups.
 Additionally, the SAC trains and consults with residential facility staff
 and coordinates the substance abuse services and policies of the facility.

IMPLEMENTATION ESSENTIALS

RSAP requires the formation of a partnership between a prevention agency that will administer the program and a residential facility where it will operate. Specific staff involved in the partnership include:

- Residential Facility Senior Executive—This person establishes the initial
 implementation agreement, oversees the program, and appoints an RSAP
 liaison who will supervise the SAC and day-to-day program operations.
- Executive Director/Project Director—This person initiates and manages the program, sets up procedures, hires staff, and is responsible for direct program oversight.
- Student Assistance Counselor (SAC)—This person implements the program at the facility and provides all prevention and early intervention services to residents.
- **Project Supervisor**—This individual supervises the SAC.

These staff members must complete the following administrative steps to ensure successful program implementation:

- Define program goals and objectives
- Define target population
- Provide training and consultation for school staff
- Establish a school staff substance abuse task force
- Establish a school substance abuse task force
- Obtain technical assistance and training

A 75-page implementation manual, which includes resource material for professionals and worksheets for students, and a video are available. Onsite and offsite training of varying lengths, up to 5 days, also is available.

PROGRAM BACKGROUND

RSAP began in 1987 as a 5-year demonstration program in Westchester County, NY, funded through a Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention High-Risk Youth Grant. The program model was based on employee assistance programs successfully used by industry to identify and aid employees whose work performance and lives had been adversely affected by substance abuse. Other experiences contributing to this program's design came from the county's successful implementation of the Westchester Student Assistance Programs within its high schools. This program intended to adapt that model for institutionalized adolescents at a very high risk for substance abuse. The residential facilities participating in the demonstration project included a locked county correctional facility, a residential treatment center for emotionally disturbed adolescents, a nonsecure residential facility, and three foster care facilities.

Target Areas

Protective Factors To Increase

Individual

- Self-efficacy and sense of mastery
- Social competence

Family

Distancing from chemically dependent parents

Risk Factors To Decrease

Individual

- Juvenile justice and criminal involvement
- Severe emotional problems or mental disabilities
- Suicidal ideation

Family

- Parental substance abuse
- Abuse and neglect

EVALUATION DESIGN

A pretest and posttest nonequivalent comparison group design was used with a total sample of 326 adolescents. Approximately 125 residents participated in RSAP, while the others served as internal and external comparison groups. The internal comparison group was composed of youth from the residential facility that chose not to participate in RSAP. The external comparison group was made up of youth from another residential facility that did not have RSAP. All participants were required to participate in a pretest and posttest assessment. Assessment instruments included a shortened version of the Monitoring the Future Questionnaire, the Rosenberg Self-Esteem Test, and the Global Assessment of Functioning. In addition, the Community Oriented Program Environment Scales were used to measure the residents' and staffs' perception of the site environment.

PROGRAM DEVELOPER

Student Assistance Services (SAS) Corporation of Tarrytown, NY, developed RSAP. SAS is a private, nonprofit, community-based substance abuse prevention organization. It was formed in 1985 when its core program, the Student Assistance Program, spun off from the Westchester County Department of Community Mental Health, which had operated it since 1979.

CONTACT INFORMATION

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RECOGNITION

Model Program—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services